

## EDITORIAL

### A Declaration of Interdependence

■ Dentistry, as a socio-economic discipline in a rapidly-changing society, faces a grave challenge. This challenge relates to dentistry's role in the social scene in which it serves as a health science.

The specialist is sometimes pessimistic about the future. The oral surgeon, for example, cites inroads into oral surgical practice by various medical specialties and pressures from physician anesthesiologists to limit anesthesia practice in dentistry. Debates arise at his meetings about the legality of a dentist doing a physical examination and signing death certificates. The general practitioner is aware of the infringements on the practice of prosthetic dentistry by "bootleg" laboratories. He may also be disturbed about organized dentistry's fluctuant relationship with management and labor in the insurance field, and the erratic development of prepayment dental insurance plans.

These facets of dentistry's relationship with medicine and the public are individual parts of a much larger "whole". The "whole" can be visualized by the dentist who is objective and philosophical. The dentist with special interests within the profession must always remember that he shares a common bond with all other dentists. In the eyes of those outside the profession, he is a dentist, regardless of his specialty. He is therefore obliged to acquaint himself with dentistry's role in society.

As the individual dentist broadens his perspective, he will realize that his own sphere of interest comprises a relatively small area in a wide spectrum of dental activity. He will acknowledge with satisfaction that four or five new dental schools have opened in the United States in the past few years and that pay standards of dental faculty members are improving; he will be pleased that a large sum of money has been allocated to study the broad aspects of dentistry—dental education, dental research, and dental practice; he will note that today's dental student possesses a wide range of cultural knowledge as a result of elevated standards of collegiate education; he will view increased efforts to enliven basic science as a dynamic force in dental practice as an important progressive step; and he will thrill at the thought of practicing dentistry in times of prosperity, when it is advancing—culturally and scientifically—faster than at any time in its history.

The true challenge of the present and the future is in the field of education. Dental educators must acknowledge the importance of a well-rounded predental education and encourage students to finish four years of college before entering dental school. This will give them a broader appreciation of the society of which dentistry is a part. The granting of Bachelor's degrees by "professional option" should be discouraged. This practice places a stigma of meaninglessness on their presentation.

Within the dental schools, the students should be familiarized with all aspects of dental practice so that they will understand the interdependence of specialized fields within the profession. If a student decides to limit his practice to one field, he will then have a deeper appreciation for his own responsibilities, not only as a specialist, but as a dentist.

Continued cooperation between dental education and other agencies in organized dentistry is necessary for the profession to meet the challenges of the future with integrity and imagination.

BRUCE L. DOUGLAS.

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## **The American Dental Society of Anesthesiology:**

### **The Past, the Present and the Future (cont'd from page 6)**

Since the A.D.S.A. influenced the House of Delegates of the A.D.A. to establish a separate Section on Anesthesiology, it has worked unofficially to enlarge and improve the anesthesia program of the annual A.D.A. meetings. The A.D.S.A. now has an official working relationship with the American Society of Oral Surgeons. Its membership, individually and collectively, is working in many spheres of activity to advance anesthesiology in dentistry — politically, academically and scientifically.

In summary, the American Dental Society of Anesthesiology is made up of dentists, not anesthesiologists, with an interest in the advancement of anesthesiology in dentistry. The Society is striving to continue to improve the standards of care for the dental patient through this advancement. This advancement depends in great part upon an effective working relationship between the A.D.S.A. and other organized agencies in medicine and dentistry with similar objectives.

B.L.D.